										A	pplication	or D	ocket Num	nber
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999								RE			09	60	252	00
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMA TYF		ENTITY	OR	OTHER SMALL	
F	OR	NUMB	ER FILED	·	NUMBER EXTRA			RAT	Έ	FEE	1	RATE	FEE	
BASIC FEE											345.00	OR		690.00
TOTAL CLAIMS			minus 20			: *			_X\$.9) =		OR	X\$18=	/
INDEPENDENT CLAIMS			minus 3 =			•			X39) _		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									+130) <u> </u>		OR	+260=	П
• If	* If the difference in column 1 is less than zero, enter "0" in column 2											4 - 1	TOTAL	690
CLAIMS AS AMENDED - PART II										,			OTHER	THAN
			umn 1)			Column 2)	(Column 3)	۱	SMA	LL	ENTITY	OR	SMALL	ENTITY
ENT A		REM AF	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total			Minus	••		=		X\$ 9)=		OR	X\$18=	
AME	Independent	<u> </u>		Minus	***	•	= .		X39	11		OR	X78=	:
	FIRST PRESE	NTATIC	N OF MU	JLTIPLE DEF	PEND	DENT CLAIM			+130	_		1	+260=	
	* * ***	e significant			•			į		TAL		OR	TOTAL	
		6 -1						. 4	ADDIT. F		<u> </u>	J OR	ADDIT. FEE	<u> </u>
			umn 1) AIMS	one of Bu.	(Column 2) HIGHEST	(Column 3)	•			ADDI	1 .	[1 4001	
ENT B		AF	AINING TER IDMENT	-488	PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•		Minus	**		=	- ;	X\$ 9	=		OR	X\$18=	
ME	Independent	•		Minus	***	,	= .		X39=			or	X78=	
`	FIRST PRESE	NTATIO	N, OF, ML	JLTIPLE DEF	PEND	ENT CLAIM		ŀ	•			OH		
•							•	·	+130		*	OR	+260=	
•						,		. ,	TOT ADDIT. F			OR	TOTAL ADDIT. FEE	<u> </u>
•			ımn 1)			Column 2)	(Column 3)				•	•		•
ENT C		REMA AF	AIMS AINING TER DMENT		PR	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
9	Total			Minus	**		=	Ī	X\$ 9=			OR	X\$18=	· ·
AMENDMENT	Independent	* * #	': '	Minus	***		=	ŀ		\dashv				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								X39=		-	OR	X78=	
• 11	the entry in colum	nn 1 is le	ss than th	e entry in colu	mn 2	write "0" in col	umn 3.		+130=			OR	+260=	
***	f the "Highest Nun f the "Highest Nur	nber Pre nber Pre	viously Pai	id For IN THIS aid For IN THIS	S SPA S SPA	CE is less than	n 20, enter "20." n 3. enter "3."		TOT. DDIT. FI	EE			TOTAL ADDIT. FEE	
7	The "Highest Num	ber Previ	iously Paic	J For" (Total or	Inder	pendent) is the	highest number	r fou	nd in the	арр	ropriate box	k in col	umn 1.	

Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND									
1 Da	te of Request: 3 40/ 2 Ser	ial/Patent	# 09/1	25200					
3 Ple	ease refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT					
-	Filing			\$ 345					
	Amendment			\$					
	Extension of Time			\$					
	Notice of Appeal/Appeal			\$					
	Petition			\$					
	Issue			\$					
	Cert of Correction/Terminal Disc.			\$					
	Maintenance			\$					
	Assignment			\$					
	Other			\$					
		7 TOTAL A	\$345.0						
		8 TO BE REFUNDED BY:							
10 REA	SON: SON:	Treasury Check							
	Overpayment	C	redit Depo	sit A/C #:					
	Duplicate Payment	, 50-0436							
	No Fee Due (Explanation):								
11 REFUND REQUESTED BY: 6 600									
TYPED/PRINTED NAME: ELECTION OF TITLE: COM CASE									
SIGNATURE: COM COM COM PHONE: 30/03/93									
OFFICE: ************************************									
APPROVED: DATE:									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

FORM PTO 1577 (01/90)